P.O. Box 747 • Falls Church, Virginia 22040-0747

ATTORNEY DOCKET NO. 0020-4792P

PLEASE NOTE: YOUMUST COMPLETE THE FOLLOWING:

Page 1 of 2

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	TUMOR ANTIGEN PEP	TIDES DERIVED	FROM CYCLOPHILIN B				
Fill in Appropriate Information — For Use Without Specification Attached:	United States Application and amended on the specification was filed on International Application Nu	on	1999 (if applica	; ble); and/or as PCT ; and was			
Insertation: (if appropriate)	amended by any amendment referred to I acknowledge the duty to disclose in §1.56. I do not know and do not believe the thereof, or patented or described in any part to this application, that the same was not application, that the invention has not be application in any country foreign to the more than twelve months (six months for this invention has been filed in any country or assigns, except as follows. I hereby claim foreign priority benef	above. formation which is material of the same was ever known or inted publication in any count of in public use or on sale in the patented or made the surface of designs) prior to this application for eight to the United States of States of the United States of States of the United States of the Unit	ts of the above identified specification, in to patentability as defined in Title 37, Code used in the United States of America before the used in the United States of America more than the United States of America before the United States of Americ	of Federal Regulations, are my or our invention more than one year prior in one year prior to this before the date of this presentatives or assigns inventor's certificate on my legal representatives dication(s) for patent or			
Insert Provisional Application(s): → (if any)		United States Code, §119(e) (Application Number)	of any United States provisional applicati	(Filing Date)			
Insert Requested Information:		-					
(if appropriate) Insert Prior U.S. Application(s): (if any) →	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application: (Application Number) (Filing Date) (Status—patented, pending, abandoned)						
	(Application Number)	(Filing Date	(Stopper material	nending shandoned)			

	Raymond C. Stewart	(Reg. No. 21,066	Terrell C	. Birch	(Reg. No.	19,382)		
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1	belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such will							
.	false statements may jeopardize the	validity of the applica	tion or any patent issued t	hereon.				
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Full Name of First or	GIVEN NAME FA	AMILY NAME	INVENTOR'S SIGNATURE	$\overline{}$	_	DATE*		
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Inventor Insert Date This				10 JU	$\mathcal{I} \mathcal{V} \subset$	/ 2000		
Document is Signed	Residence (City, State & Country)		11734	*	CITIZENSHIP			
i Insert Residence →	Kiyama-cho, Miyaki-	-gun, Saga-ke	$n \rightarrow \gamma$		Japan			
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Insert Post Office	2-25-9, Keyaki-dai,	Kiyama-cho,	Miyaki-gun, S	aga-ken,	Japan	·		
Full Name of Second	GIVEN NAME . FA	AMILY NAME	INVENTOR'S SIGNATURE	·		DATE*		
Inventor, if any:	Shinya G	OMI	Shinya	G.		December6, 2000		
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	OUT NAME				•	1		
Full Name of Third	GIVEN NAME FA	MILY NAME	INVENTOR'S SIGNATURE			DATE*		
Inventor, if any see above				•				
	Residence (City, State & Country)				CITIZENSHIP			
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Full Name of Fourth	GIVEN NAME FA	MILY NAME	INVENTOR'S SIGNATURE		-	DATE*		
Inventor, if any		· -						
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Full Name of Fifth Inventor, if any	GIVEN NAME FA	MILY NAME	INVENTOR'S SIGNATURE			DATE*		
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Page 2 of 2 (Revised 11-98)	* DATE OF SIGNATURE		_					

following attorneys to prosecute this application and/or an in

in the Patent and Trademark Office connected therewith an

the entity who first sent the application papers to the atto

assignee provides said attorneys with a written notice to the contrary:

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dentified below, unless the inventor(s) or

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